



Liquor Control Board
Licensing and Regulation
PO Box 43098
Olympia WA 98504-3098
www.liq.wa.gov
Fax: (360) 753-2710

UBI

Liquor Control Board Addendum - Retail

This form **must** accompany a Master Application from the Department of Licensing, Master License Service.

You must disclose your spouse's information such as name, social security number and date of birth on the Master Application. Indicate N/A for no spouse. Incomplete form will result in the delay of your liquor license.

Questions? Please call the Liquor Control Board's customer service desk at (360) 664-1600

FOR ALL APPLICANTS:

1. Applicant name _____
2. Are you assuming a business that has a current liquor license?..... ☐ YES ☐ NO
If yes, current licensee's liquor license number and class of license _____
3. Are you closing your business and moving to a new location?..... ☐ YES ☐ NO
Address of new location _____
4. Contact person for questions regarding application _____
Mailing address _____
Business Phone () _____ Home Phone () _____
5. Is this premises location
Tribal lands?..... ☐ YES ☐ NO
If yes, name of tribe _____
Federal ☐ YES ☐ NO
If yes, name of federal entity _____
Port authority lands?..... ☐ YES ☐ NO
If yes, name of port authority _____
Automotive ☐ YES ☐ NO
If yes, name of track _____
Fairground ☐ YES ☐ NO
If yes, name of fair authority _____

OVER

6. Does any applicant or spouse have any interest, financial or otherwise, in any manufacturer, distributor, or importer of beer, wine, or spirits?..... ☐ YES ☐ NO
7. Does a manufacturer, distributor, or importer of beer, wine, or spirits have any interest in your business, financial or otherwise?..... ☐ YES ☐ NO
8. Is any applicant or spouse employed by a manufacturer, distributor, or importer of beer, wine, or spirits?..... ☐ YES ☐ NO
9. For sole proprietorship or partnership applications: Have the sole proprietor and spouse or each partner and spouse resided in Washington State at least one month prior to filing this application?..... ☐ YES ☐ NO

FOR SPIRITS, BEER, AND WINE RESTAURANTS SEASONAL LOCATIONS:

1. If this is a declared seasonal operation, check the calendar quarters during which you will operate:

<input type="checkbox"/> January - February - March	<input type="checkbox"/> July - August - September
<input type="checkbox"/> April - May - June	<input type="checkbox"/> October - November - December

FOR SPIRITS, BEER, AND WINE RESTAURANT DUPLICATE LICENSES:

1. For Spirits, Beer, and Wine restaurants who plan to sell liquor from additional sites on the same property, and are applying to operate within an:

<input type="checkbox"/> Airport terminal	<input type="checkbox"/> Civic center	<input type="checkbox"/> Privately owned facility open to the public, which contains multiple buildings with separate dining facilities
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2. How many duplicate licenses do you want? _____
 (Please see the "Liquor License Fee Information and Description Sheet" for fees)